CHANGE OF ADDRESS FORM BROKER/BANKER and BRANCHES

DIVISION OF MORTGAGE LENDING NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY

Mail to: 400 W. King Street, Suite 406

Print Name

Carson City, NV 89703

(775) 684-7060, Fax (775) 684-7061

Please enclose your original broker or branch license with this form. Maintain a photo copy. Submit the request 7-10 business days in advance of the move. The Division will return a new license to indicate the change in address upon approving this change. Proposed location must allow business signage. **Mortgage Broker (Principal location)** Change of address for a \Box **Mortgage Broker Branch** Mortgage Banker (Principal location) Mortgage Banker Branch NAC 645B.040 (c) The mortgage broker may not change the location of his principal office or branch office until the commissioner has approved the transfer. NAC 645E.230 (c) The mortgage banker may not change the location of his principal office or branch office until the commissioner has approved the transfer. **CURRENT ADDRESS:** Licensee Name (DBA):_____ Address: Street City State PROPOSED NEW ADDRESS: Proposed location must allow business signage Address: Street Fax_ Phone: Effective Date:___ Will the company share premises with another company? Yes If answered yes please list business, nature of relationship and how businesses will be segregated: Required items: 1. Original license (The Division will return an amended license to indicate the change in address upon approving this change) 2. List of mortgage agents moving to new location, including any issued agent licenses Signature of Owner or Qualified Employee Date